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Bib Data Sheet

CONFIRMATION NO. 1645

<b>SERIAL NUMBER</b> 10/663,365	<b>FILING OR 371(c) DATE</b> 09/15/2003 <b>RULE</b>	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2176	<b>ATTORNEY DOCKET NO.</b> 09282.0014-00000
<b>APPLICANTS</b> Joerg Beringer, Frankfurt, GERMANY; Michael Hatscher, Osnabrueck, GERMANY; Annette Haeussler, Heidelberg, GERMANY;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/471,228 05/16/2003 and claims benefit of 60/436,219 12/23/2002 and claims benefit of 60/471,375 05/16/2003 <i>AL</i>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 12/08/2003</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>[Signature]</i> Allowance Examiner's Signature <i>[Signature]</i> Initials <i>[Signature]</i>		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 18
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> 22852				
<b>TITLE</b> Resource templates				
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____	